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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Richard B. North; Jeffrey M. Sieracki; Kim R. Fowler; Lon H. Holland	Confirmation No.	3945
Serial No.:	10/669,392	Filed:	September 24, 2003
Examiner:	George Robert Evanisko	Group Art Unit:	3762
Docket No.:	1023-306US03	Customer No.:	28863
Title:	PATIENT INTERACTIVE NEUROSTIMULATION SYSTEM AND METHOD		

CERTIFICATE UNDER 37 CFR 1.8 I hereby certify that this correspondence is being transmitted via facsimile to the United States Patent and Trademark Office on November 1, 2006.

By: Shirley A. Betlach
Name: Shirley A. Betlach

Commissioner for Patents
Alexandria, VA 22313-1450

Sir:

We are transmitting herewith the attached correspondence relating to this application:

- Transmittal sheet containing Certificate of Mailing

CLAIMS AFTER AMENDMENT

Number of Claims After Amendment	Previously paid	Number Extra	Rate	Fee
Total Claims				
43	40	3	x \$50.00	= \$150.00
Independent Claims				
3	6	0	x \$200.00	= \$0
TOTAL				\$150.00

- Response to Restriction Requirement & Preliminary Amendment (9 pgs.)

Please charge Deposit Account No. 50-1778 the amount of \$150.00 to cover the fee for additional claims for a large entity.

Date:

November 1, 2006

By:

Jessica H. Kwak

Name: Jessica H. Kwak

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TO:	PROM:
Mail Stop Amendments	Jessica H. Kwak
COMPANY:	DATE:
U.S. Patent & Trademark Office	NOVEMBER 1, 2006
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
571-273-8300	11
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
571-272-4945	1023-306US03
RE:	APPLICATION SERIAL NUMBER:
Response to Restriction Requirement dated October 2, 2006	10/669,392

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PRELIMINARY AMENDMENT AND RESPONSE TO RESTRICTION
REQUIREMENT

Commissioner for Patents
Alexandria, VA 22313-1450

Dear Sir:

In response is to the Office Action mailed October 2, 2006, the period of response for which runs through November 2, 2006, please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 9 of this paper.

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